

Condino V., D'Agostino A., Gagliardini G. 1

DOI: 10.6092/2282-1619/2018.6.1938

Mediterranean Journal of Clinical Psychology MJCP

ISSN: 2282-1619

VOL. 6, n.2 Suppl. 2018

Proceedings

***XX NATIONAL CONGRESS
ITALIAN PSYCHOLOGICAL ASSOCIATION
CLINICAL AND DYNAMIC SECTION
URBINO – 7/9 SEPTEMBER 2018***

*Department of Humanities
University of Urbino, Italy*

SYMPOSIUM SESSION

Scientific Committee

Renata Tambelli (Coordinator AIP Clinical and Dynamic Psychology Section, Sapienza University of Rome), Mario Fulcheri (Past Coordinator AIP Clinical and Dynamic Psychology Section, G. d'Annunzio University of Chieti-Pescara), Maria Francesca Freda (Federico II University of Naples), Claudia Mazzeschi (University of Perugia), Enrico Molinari (Catholic University of the Sacred Heart of Milano), Silvia Salcuni (University of Padua).

Local Committee

Coordinators: Mario Rossi Monti (Carlo Bo University of Urbino), Antonello Colli (Carlo Bo University of Urbino).

Members: Elena Acquarini (Carlo Bo University of Urbino), Carmen Belacchi (Carlo Bo University of Urbino), Manuela Berlingeri (Carlo Bo University of Urbino), Glauco Ceccarelli (Carlo Bo University of Urbino), Antonella Di Ceglie (Carlo Bo University of Urbino), Daniela Pajardi (Carlo Bo University of Urbino), Maria Pediconi (Carlo Bo University of Urbino), Emanuele Russo (Carlo Bo University of Urbino), Tiziana Schirone, (Carlo Bo University of Urbino), Claudio Tonzar (Carlo Bo University of Urbino).

Technical & Secretary Members

Antonello Colli, Valeria Condino, Alessandra D'Agostino, Giulia Gagliardini, Mario Rossi Monti.

PAIN AND EMOTION RECOGNITION: THE ROLE OF ALEXITHYMIA

Castelli Lorys¹, Di Tella Marialaura¹, Adenzato Mauro¹, Tesio Valentina¹

¹ Department of Psychology, University of Turin

Abstract

Introduction. Patients with Fibromyalgia (FM), a chronic pain syndrome, seems to display cognitive bias for the encoding of pain-related information. The present study tested the hypothesis of an increased attribution of pain to facial expressions of emotions (FEE), in patients with FM. Since previous studies have shown that alexithymia influences the processing of facial expressions, we also investigated whether alexithymia, rather than FM per se, influenced the attribution of pain to FEE.

Methods. One hundred and twenty-three women (41 with FM, 82 healthy controls, HC) were enrolled in the study. We adopted two pain-attribution tasks, the Emotional Pain Estimation and the Emotional Pain Ascription, both using a modified version of the Ekman 60 Faces Test. Psychological distress was assessed using the Hospital Anxiety and Depression Scale, while alexithymia was assessed using the Toronto Alexithymia Scale.

Results. Firstly, patients with FM did not show any deficits with respect to HC neither in the recognition of basic emotion nor in the attribution of pain to FEE.

On the contrary, alexithymic individuals (vs non alexithymic ones) attributed significantly more pain to angry facial expression ($t(121) = -2.56, p < 0.012, d = 0.58$), in the absence of any specific deficits in the recognition of basic emotions. What is more, the results of the one-way ANCOVA indicated a significant effect of alexithymia on the anger scores also after controlling for HADS total score $F(1, 120) = 7.57, p = 0.007$.

Conclusions. Alexithymia, rather than FM per se, plays a key role in explaining the observed differences in pain attribution to anger-related facial expressions. In particular, alexithymic individuals seems to display difficulties in processing others' emotions only when they are not provided emotional definitions to make faces meaningful, as in the case of the Emotional Pain Estimation test.